

**DECLARATION FOR UTILITY OR** 

**DESIGN** 

390086.94804

Joseph P. Debbins

PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

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**Attorney Docket Number** 

First Named Inventor

PATENT APPL	CO	COMPLETE IF KNOWN							
(37 CFR 1	.63)	Application Num	ber 09	839,055					
Declaration	Declaration	Filing Date	April 20	, 2001					
Submitted OR with Initial	Submitted after Initial Filing (surcharge	Group Art Unit							
Filing	(37 ČFR 1.16 (e)) required)	Examiner Name			_)				
As a below named inventor, I he	reby declare that:								
My residence, mailing address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
Graphic Application Development System for a Medical Imaging System									
·	(Title of the	nvention)							
the specification of which	(77.00 07 07.0	, modificación							
is attached hereto									
OR									
was filed on (MM/DD/YYYY)	April 20, 2001	as United Sta	ates Application N	Number or PCT International					
Application Number 09/839,055	and was an	nended on (MM/DD/YY	m	(if applical	ble).				
I hereby state that I have reviewed amended by any amendment spec	and understand the cont ifically referred to above.	tents of the above identi	ified specification	, including the claims, as					
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation- in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached YES NO	d?				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									

[Page 1 of 2]

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## **DECLARATION** — Utility or Design Patent Application

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<sub>Name</sub> Terri S. Flynn							
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INV	ENTOR:			A petition	on has been fil	ed for this unsigned inventor	
Given Name (first and middle (if any))  Given Name (first and middle (if any))  Family Name Debbins or Surname							
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Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

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+ PTO/SB/02A (11-00)

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## **DECLARATION**

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 4

				-			
Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor							
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## **DECLARATION**

**ADDITIONAL INVENTOR(S)** Supplemental Sheet Page 3 of 4

			•					
Name of Additional Joint Inventor, if any:				A petition has been filed for this unsigned inventor				
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Inventor's Signature						9   21   2001 Date		
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Name of Additional Joint Inventor, if a	ny:			A petition has been filed	for this	unsigned inventor		
Given Name (first and middle [if any]	)		Family Name or Surname					
Inventor's Signature					Date			
Residence: City State			Country			Citizenship		
Malling Address								
Mailing Address					.,			
City	State	е		ZIP	Co	ountry		

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